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S.D. SEC. OF STATE

STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

1. TITLE OF NEWSPAPER Elkton Record		2. DATE 9-28-2017
3. FREQUENCY OF ISSUE Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY 51	3B. ANNUAL SUBSCRIPTION PRICE $ 40.28/40
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) 205 Elk St., PO Box K, Elkton, Brookings County, SD 57026		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) RFD Newspapers, Inc., 207 Kasan Ave, PO Box 18, Volga, SD 57071		
6. FULL NAME OF PUBLISHER: Ken Reiste		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given. FULL NAME — COMPLETE MAILING ADDRESS Ken Reiste, PO Box 830, Clear Lake, SD 57226-0830		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form. None		

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	350	350
B. PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors, and counter sales.	75	75
2. Mail Subscription (Paid and or requested)	156	154
3. Paid Electronic Copies	9	10
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	240	239
D. FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	13	0
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	15	0
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	268	239
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	82	111
2. Return from News Agents	0	0
G. TOTAL (Sum of E, F1 and F2 – Should equal total shown in A.)	350	350

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

Ken Reiste
(Signature)

publisher
(Title)

Sworn to before me this 28th day of September 20 17

Brenda Schake
Notary Public

My commission expires: 9-21-21

State of South Dakota)
§
County of Deuel)

(Seal) BRENDA SCHAKE
NOTARY PUBLIC
SOUTH DAKOTA